	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Magas McSuice Set Addressee  B. Received by (Printed Name)  C. Date of Delivery  Megan McGuire  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below: No  3. Service Type  Certified Mail Express Mail  Registered Receipt for Merchandise  Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee)
	1. Article Addressed to: ENF- W	
	Ms. Wylie McGuire, Chairman Lance Creek Water and Sewer Dist. 795 V-5 Hilltop Road Lance Creek, WY 82222	
	Docket # SowA-08-2008-0064	
	2. Article Number 7007 1/	490 0001 4774 9563
	PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540